

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 740711

FILED
Feb 05, 2009
Secretary of State

Entity Name: WEKIVA PRESBYTERIAN CHURCH, INC.

Current Principal Place of Business:

211 WEKIVA SPRINGS LANE
LONGWOOD, FL 32779

New Principal Place of Business:

Current Mailing Address:

211 WEKIVA SPRINGS LANE
LONGWOOD, FL 32779

New Mailing Address:

FEI Number: 59-2070567

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SUNNER, JOHN A.
190 MAGNOLIA LAKE CT
LONGWOOD, FL 32779 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VT () Delete
Name: ANDERSON, MARCI
Address: 138 LEDBURY DRIVE
City-St-Zip: LONGWOOD, FL 32779

Title: PT () Delete
Name: BROWN, STEPHEN
Address: 103 HILLCREST DRIVE
City-St-Zip: LONGWOOD, FL 32779

Title: ST () Delete
Name: SINCLAIR, KATHRYN
Address: 2708 DORADO COURT
City-St-Zip: APOPKA, FL 32703

Title: T () Delete
Name: SWISHER, ROBERT II
Address: 104 COUNTRY HILL DRIVE
City-St-Zip: LONGWOOD, FL 32779

Title: T () Delete
Name: MOSELEY, KENNETH
Address: 111 COVE LAKE DR
City-St-Zip: LONGWOOD, FL 32779

Title: T () Delete
Name: TURNER, SUSAN
Address: 203 SWEET WATER COVE NORTH
City-St-Zip: LONGWOOD, FL 32779

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: SEAYER, SEAN
Address: 132 LEDBURY DRIVE
City-St-Zip: LONGWOOD, FL 32779

Title: T (X) Change () Addition
Name: STRUCK, KAREN
Address: 106 HILLCREST DRIVE
City-St-Zip: LONGWOOD, FL 32779

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: STEVE BROWN

PT

02/05/2009

Electronic Signature of Signing Officer or Director

Date